

POSITION	ID NO.	DATE
CLASSIFIER		46 6-29-95
EXAMINER	28	6/30
TYPIST	712	7-1-95
VERIFIER	411	7/5/95
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

**Best Available Copy**

**INDEX OF CLAIMS**

Claim	Date
Final	
Original	
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**SYMBOLS**

- Rejected
- Allowed
- (Through numbered) Cancelled
- Restricted
- Non-elected
- Interference
- Appeal
- Objected

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